

ISSUE SLIP STAMP AREA (for additional cross references)

POSITION	INITIALS	IC NO.	DATE
FEE DETERMINATION	<i>msf</i>		<i>7/1/6</i>
O.I.P.E. CLASSIFIER		<i>12</i>	<i>7/1/6</i>
FORMALITY REVIEW	<i>S</i>	<i>500</i>	<i>7/1/6</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 - Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
1	<i>8/27/01</i>
2	<i>11/19/02</i>
3	<i>3/20/03</i>
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY
 FILE CC

If more than 150 claims or 10 actions
staple additional sheet here

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TC 859
8/24